PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10/501832

CLAIMS AS FILED - PART I (Column 1) (Column:2)								SMALL ENTITY TYPE			OTHER THAN OF SMALL ENTITY		
TC	TAL CLAIMS		(Coldinir 1)		(COIG		l .	RATE	FEE		RATE	FEE	
TOTAL CLAIMS											BASIC FEE	820	
FOR .			NUMBER FILED		NUMBI	ER EXTRA		BASIC FEE	385.00	OR	DASIC FEE		
TOTAL CHARGEABLE CLAIMS			/0 minus 20=		•			XS 9=		OR	X\$18=		
IND	EPENDENT CL	AIMS	3 mi	nus 3 =				X43=	•	OR	X86=		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT	__				+145=		OR	÷290=		
* If the difference in column 1 is less than zero, enter "0" in c						olumn 2	ı	TOTAL		OR	TOTAL	920	
CLAIMS AS AMENDED - PART II											OTHER	THAN	
(Calumn 1)					(Column 2) (Column 3)			SMALL ENTITY			SMALL	NTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=]	XS 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		ÖR	X86=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]	+145=		OR	+290=		
-		•			•		ı	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(0.1 4)		(Colui	mp 2)	(Column 3)		AUUH, FEE I			A0011.1 CE.		
		(Column 1)	1	HIĞH		(Column 3)	l L		ADDI-	ı		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI PAID		PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE	
	Total	*	Minus	**		=	1	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=] [X43=		OR	X86=		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
								TOTAL ADDIT FEE		OR	TOTAL ADDIT. FEE		
											ADDII. FEE		
		(Column 1)		(Colu	mn 2) IEST	(Column 3)	<u>,</u>			,		4001	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE ·	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .] [X\$ 9=		OR	X\$18=	, .	
	Independent	*	Minus	***		=	↓	X43=		OR	X86=		
V	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								1	+290=			
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	TOTAL		
		1 1000 1				iui III) J.		TOTAL			IUTIAL	-	
**	If the "Highest Nu	mber Previously P imber Previously P	aid For" IN TH	IS SPACE	is less tha	n 20, enter "20	o.* ,	TOTAL ADDIT. FEE		OR	ADDIT. FEE		